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TRANSMITTAL LETTER

The Honorable Rick Perry, Governor
The Honorable David Dewhurst, Lieutenant Governor
The Honorable Joe Straus, Speaker of the House of Representatives

Pursuant to V.T.C.A., Health and Safety Code Sec. 102.052 please accept this annual report from the Cancer Prevention and Research Institute of Texas (CPRIT). This document summarizes how CPRIT is fulfilling its mission of reducing the burden of cancer in Texas.

Cancer is the leading cause of death among Texans younger than 85 years of age. On average, more than 100 Texans die from cancer every day. The tragic emotional and physical toll of cancer is incalculable, but in purely economic terms, Texas cancer deaths translate into an annual cost to the state of about \$30.4 billion in medical expenses and lost productivity.

But Texas is not passively standing by. Through August 2013, CPRIT has announced **498** awards for research, prevention and product development grants totaling **\$836** million.

Prevention projects and programs reach Texans in all 254 counties. In addition to providing education and training to 794,386 people, CPRIT has funded clinical services for 570,915 Texans, including 113,116 who have never before been screened for cancer.

In common terms, cancer is a disease in which normal cells misbehave by multiplying uncontrollably, ignoring signals to stop, and often clumping into masses called tumors. However, cancer is not as simple as that description implies. There are at least 200 different types of cancer, each named for the organ or type of cell from which it begins. It is a complex disease.

The projects and programs supported by CPRIT, as with all biomedical undertakings, are part of an iterative cycle with observations emerging from the laboratory making their way to the patient's bedside and back again to the laboratory. Essential players in this cycle are basic scientists, physician-scientists, clinical researchers, product development entrepreneurs, public health professionals, patients and health care providers. The Institute arms all of these soldiers in the battle against cancer.

State law specifies numerous elements for CPRIT's annual reports. For the first time, this 2013 edition includes all previously required elements as well as those added by the 83rd Texas Legislature. Among the many changes made by the Legislature to increase transparency and strengthen CPRIT's governance and operations is a requirement that the Oversight Committee establish annual priorities for the research, prevention, and product development grant programs. This endeavor, which commences in 2014, will make it possible for future CPRIT annual reports to provide additional information to evaluate our performance and progress.



The opportunity to reassess CPRIT's operations and direction with the Legislature and state leadership over the past year was highly valuable. Special thanks must be extended to the teams of advocates from numerous cancer related organizations that met with legislators, testified at committees, wrote op-ed pieces, and worked tirelessly on CPRIT's behalf.

On behalf of the CPRIT Oversight Committee and the agency's staff, I thank you and all members of the Texas Legislature for making 2013 a great year of reflection and new beginnings. We look forward to the future and new opportunities to fulfill our mission to improve the health and lives of our fellow Texans.

Sincerely,

Wayne R. Roberts

Chief Executive Officer



Introduction

The Cancer Prevention and Research Institute of Texas, or CPRIT, is charged by the Texas Legislature to:

- Create and expedite innovation in the area of cancer research, and in enhancing the potential for a medical or scientific breakthrough in the prevention of cancer and cures for cancer;
- Attract, create, or expand research capabilities of public or private institutions of higher education
 and other public or private entities that will promote a substantial increase in cancer research and in
 the creation of high-quality new jobs in this state; and
- Develop and implement the Texas Cancer Plan.

Created by the Texas Legislature and authorized by Texas voters in 2007, CPRIT began in 2009 to award grants to Texas-based organizations and institutions for cancer-related research and product development and for the delivery of cancer prevention programs and services.

State statutes codifying CPRIT are V.T.C.A., Health and Safety Code, Chapter 102. In fiscal year 2013, the 83rd Texas Legislature substantially amended this legislation through the passage of Senate Bill 149, and changes related to that legislation effective in fiscal year 2013 are addressed in this report. Additional changes to CPRIT's operations that take effect after fiscal year 2013 will be addressed in future reports.



CPRIT OVERSIGHT COMMITTEE

The CPRIT Oversight Committee is the governing body of the Institute. The committee may adopt such policies and practices, consistent with applicable law, as it deems proper for the conduct of its meetings and the management of the agency.

Priorities

According to V.T.C.A., Health & Safety Code, Section 102.107 (as amended in 2013), the core responsibilities of the Oversight Committee include:

- Annually setting priorities for each grant program funded by the Institute (research, prevention, and product development);
- Considering these priorities in awarding grants; and
- Hiring a chief executive officer for the Institute.

In 2013, amendments to CPRIT's enabling legislation reconstituted the Oversight Committee and added a requirement that three members (one appointed by each of the state's elected appointing leadership officers) be "physicians or scientists with extensive experience in the field of oncology or public health."

Members (prior to June 14, 2013)

Appointed by Gov. Rick Perry
Angelos Angelou Austin
Gerry Geistweidt Mason
Faith Johnson De Soto

Appointed by Lt. Gov. David Dewhurst
Joseph Bailes, M.D. Austin
Chair James Mansour Austin
Charles Tate Houston

Appointed by House Speaker Joe Straus

Preston "Pete" Geren Fort Worth

Mark Watson, Jr. San Antonio

(Vacant)

The Honorable Greg Abbott, Attorney General
The Honorable Susan Combs, Comptroller of
Public Accounts

Members (as of December 31, 2013):

Appointed by Gov. Rick Perry
Angelos Angelou Austin
Gerry Geistweidt Mason
Chair William Rice, M.D. Austin

Appointed by Lt. Gov. David Dewhurst
Ned Holmes Houston
Amy Mitchell Austin
Craig Rosenfeld, M.D. Dallas

Appointed by House Speaker Joe Straus

Preston "Pete" Geren Fort Worth

Will Montgomery Dallas

Cynthia Mulrow, M.D. San Antonio



REPORT FROM THE CHIEF EXECUTIVE OFFICER

The State of the Agency

For the Cancer Prevention and Research Institute of Texas, fiscal year 2013 was defined by profound reflection and re-examination of why CPRIT was created by the Texas Legislature and authorized by the citizens of Texas in the first place, and of how the Institute had operated between 2008 and 2012.

During those years, the CPRIT Oversight Committee organized and retained the key leaders who quickly built the new agency into a major force in the fight against cancer. The Institute developed and implemented a complex peer review process, using out-of-state blue-ribbon scientific, prevention, and product development professionals, to identify and guide funding for the cutting-edge programs envisioned by the Legislature and the Texas medical, public health and bioscience community.

In 2012, questions arose about several CPRIT awards as well as concerns about possible conflicts of interest that may have interfered in the evaluation processes. In December of that year, state leadership asked the Institute to suspend its operations until the Legislature could review if CPRIT had been operating as envisioned and what mid-course adjustments might be needed when it restarted. Also, during the latter part of 2012 a national search was conducted to identify a successor to the first chief scientific officer who had announced his resignation in May effective in mid-October. The successful search concluded with the nationally recognized recruit arriving at CPRIT in early January of 2013.

The first half of 2013 focused almost exclusively on the legislative reassessment and CPRIT's self-examination. The work began with the arrival of two administrators with some 72 years of state agency and legislative experience between them. These two worked closely with lawmakers to provide the information needed by the Legislature to decide if and how CPRIT should move forward. In addition, an exhaustive review of all grants awarded by CPRIT verified that all appropriate processes and procedures had been used and that no conflicts of interest affected the outcome of any grant making decision.

The outcome, Senate Bill 149, modified CPRIT's enabling legislation to restore trust in the Institute and improve transparency of agency operations and to incorporate recommendations made in a January 2013 state management audit. The legislation codified prior CPRIT administrative code provisions and established strict conflict of interest and process compliance procedures, enforced through numerous checks, balances and certifications that all requirements are met prior to any grant awards being made.

Senate Bill 149 also reconstituted the Oversight Committee of the Institute. As part of the legislative "reset," three members of the Oversight Committee are now physicians or scientists with extensive experience in the field of oncology or public health; others include cancer survivors or family members of cancer patients. To accommodate these requirements, the Legislature removed all Oversight Committee members serving prior to the effective date of the Act (June 14, 2013). New Oversight Committee members were appointed in the fall of 2013.



The legislation required the new Oversight Committee to select a chief executive officer (replacing the former CPRIT executive director) by December 1, 2013. On November 22, 2013, the Oversight Committee elevated the interim executive director to this position. This action allowed the Institute to proceed with filling other key positions essential to address the requirements of its enabling legislation, including chief compliance officer, chief product development officer, internal auditor, and additional grant monitors, reimbursement specialists, and legal support.

On October 30, 2013, state leadership lifted the suspension of CPRIT's grant awarding and review process. In November, the agency began finalizing contracts for previously approved awards that had been affected by this moratorium and carefully resumed its grant solicitation, review and awarding processes.

As of this writing, CPRIT is again addressing its public mission of:

- 1. Creating and expediting innovation in the area of cancer research and in enhancing the potential for a medical or scientific breakthrough in the prevention of cancer and cures for cancer; and
- 2. Attracting, creating, or expanding research capabilities at institutions of higher education and other public or private entities that will promote a substantial increase in cancer research and creation of high-quality new jobs in Texas.

As CPRIT resumes its work, the Oversight Committee and staff are committed to advancing these two purposes. But in so doing, it is with full recognition of the paramount importance of transparency, accountability, integrity and adherence to its intricate processes in the conduct of Texans' business.

Rules, Regulations and Procedures

During fiscal year 2013, the Legislature and the Institute identified a number of measures designed to strengthen CPRIT governance and administration. As of this writing, CPRIT has achieved a number of these key milestones, including:

- Publishing for comment and future adoption of revised and new Texas Administrative Code provisions (TAC Title 25, Chapters 701-704) regarding compliance, conflicts of interest, grant review processes and other matters;
- Retaining a chief executive officer and chief compliance officer by the December 1, 2013, deadline;
- Implementing, or in the process of implementing, all 41 of the recommendations for the agency contained in the January 2013 report by the Office of the State Auditor;
- Creating the Program Integration Committee (PIC) required by Senate Bill 149, to ensure thorough
 review of grants before their consideration by the Oversight Committee and to best address the
 grant program priorities established for the Institute by the Oversight Committee;
- Beginning to recruit additional compliance and grant monitoring staff, including a full-time internal auditor to report directly to the Oversight Committee;
- Performing an agency-wide risk assessment, findings from which are now being addressed;



- Ending the prior practice of salary supplementation with private funds for certain Institute personnel;
- · Ending relationships with private outside foundations, including the former CPRIT Foundation; and
- Seating new Oversight Committee members appointed by the Governor, Lieutenant Governor and House Speaker, with new qualifications as established by Senate Bill 149.

Transparency, Accountability and Effectiveness

As noted, during fiscal year 2013 the Institute worked with the Legislature and state leadership to identify necessary improvements to CPRIT's transparency and accountability to ensure its optimal effectiveness in using Texas' public funds to respond to the challenge of cancer. Some of these measures are addressed in CPRIT's amended enabling legislation; others are incorporated in new and revised Texas Administrative Code provisions, changes to the Oversight Committee bylaws, or internal policies and procedures of the Institute. As of this writing, CPRIT has implemented (or is in the process of implementing) improvements that include:

- Adopting a new Code of Conduct for the Oversight Committee;
- Making changes to the grant approval process, under which the Oversight Committee will, by a
 two-thirds majority, approve directly each award recommendation from the Program Integration
 Committee. (Prior practice was for the Oversight Committee to consider slates of awards
 recommended by the executive director, which would be approved unless the committee, by a
 two-thirds vote, rejected the entire slate.);
- Implementing a compliance program under the chief compliance officer;
- Beginning to recruit new grant monitors and compliance personnel, including a full-time internal auditor to report directly to the Oversight Committee;
- Adopting new conflict of interest provisions and posting them on the CPRIT website (www.cprit.state.tx.us);
- Posting political contributions made by Oversight Committee members on the CPRIT website;
- Posting and updating on the CPRIT website the implementation status of the 41 State Auditor recommendations applicable to the agency;
- Posting all other audit reports on the CPRIT website along with the agency response;
- Adopting and posting on the CPRIT website the waiver policy for the chief scientific officer, commissioner of state health services, and others, when applicable (Sec. 102.052(a)(10);
- Adopting and posting on the CPRIT website a revised honoraria policy for peer reviewers and members of CPRIT's peer review councils;
- Holding Oversight Committee meetings in the State Capitol, broadcasting the meetings over the Internet, and permanently posting meeting videos on the CPRIT website;
- Providing Oversight Committee meeting materials for public review on the CPRIT website in advance of public meetings;



- Reconceiving CPRIT's annual agency report, including developing processes to collect and provide more data in print and on the CPRIT website;
- Closing the CPRIT Dallas office and moving the Institute's Houston office to private leased space to avoid the potential conflict of interest posed by using space provided by a CPRIT grantee; and
- Establishing strict and well-defined matching fund requirements for institutions of higher education.

The Institute is fortunate to have retained the vast majority of its accomplished and dedicated staff professionals as it resumes its work. New review panel members and chairs were recruited for the Scientific Review panels and joined the other distinguished members of the Product Development and Prevention review councils. In addition, the agency benefits from an invigorated and committed new Oversight Committee. These participants are supported in their pursuit of optimal agency effectiveness by several notable enhancements to CPRIT's processes, including:

- The requirement for the Oversight Committee to develop program priorities that outline the policy
 direction of the agency and establish benchmarks by which to measure CPRIT's progress in meeting
 its goals and wise investment of public funds;
- Development and use of subcommittees of the Oversight Committee that will enhance its ability to provide active and committed leadership and governance; and
- Inclusion of patient advocates on Research and Product Development peer review committees to
 ensure that grant recommendations are made with careful consideration of the needs of Texans
 living with cancer.

As of this writing, and with these many improvements and enhancements in place, the Institute has resumed the work for which it was created — identifying and supporting the outstanding work of the researchers, scientists, clinicians, health care professionals, educators, nonprofit organizations and private sector enterprises that have placed the State of Texas in the forefront of the war against cancer. The Institute looks forward to announcing in future annual reports the advances made in mitigating the scourge of cancer that result from the agency's renewed sense of purpose and strategic focus.



THE IMPACT OF CANCER IN TEXAS AND THE STATE'S RESPONSE

Cancer is the second leading cause of death in Texas and the nation, behind heart disease. It is the leading cause of death for persons younger than 85 years, and is expected to surpass heart disease as the overall leading cause of death within this decade. It is estimated that one in two men and one in three women will be diagnosed with cancer in their lifetimes.

In 2013, it is estimated that there were 117,371 Texans newly diagnosed with cancer and 41,362 who died of the disease.

With improvements in treatment, and cancers being detected earlier, there are increasing numbers of cancer survivors. Additionally, the number of people diagnosed with and living with cancer will continue to increase as the population grows and ages.

Cost of Cancer to Texas

According to the An Economic Assessment of the Cost of Cancer in Texas and the Benefits of the Cancer Prevention and Research Institute of Texas (CPRIT) and its Programs report, direct medical costs and morbidity and mortality losses in the state totaled \$30.4 billion, up from \$29.2 billion in 2012.

Cancer costs the Texas economy:

- \$150.9 billion in reduced annual spending;
- \$74.4 billion in output losses annually; and
- 747,850 lost jobs from cancer treatment, morbidity and mortality and the associated spillover effects.

Cancer also costs the government of the State of Texas nearly \$900 million annually in health-related expenditures, as shown below:

Initiative/Organization	Cancer-Related Expenditures
Children's Health Insurance Program	\$11.2 million (FY 2012)
Texas Medicaid	\$315.6 million (FY 2012)
Teacher Retirement System of Texas	\$347.3 million (FY 2013)
Employees Retirement System of Texas	\$223 million (FY 2013)

Other Sources of Cancer Funding

Nationally, more than \$18 billion annually is spent on cancer research, product development and prevention programs. As shown in the chart below, more than half of this funding comes from private industry sources,



with a somewhat smaller amount coming from federal sources (the National Cancer Institute, as well as other federal programs such as those within the Department of Defense). While CPRIT is believed to be the largest single source of non-federal public cancer funding, the Institute's \$300 million in annual funding makes up a relatively small percentage of this total.

CANCER RESEARCH FUNDING



Source: "Report of the National Cancer Advisory Board AD Hac Working Group, Dec. 2010"

CPRIT's Economic Impact for Texas

Economic development, and specifically the creation of high-quality new jobs for Texas, is a stated element of the mission of CPRIT as defined by statute. Through the end of fiscal year 2013, the following results can be attributed to CPRIT's activities and investments:

- \$2.4 billion in Texas business activity;
- 24,510 jobs created through direct and indirect economic activity; and
- \$129.9 million in state tax receipts and \$60.3 billion in local government tax receipts.

In addition to these economic development accomplishments, CPRIT's efforts also enable Texans' prosperity by reducing the economic costs of cancer. For example, every \$1 that CPRIT invests in screening programs results in an estimated \$7 savings in treatment costs, preserved productivity, and other economic benefits through earlier detection of cancers. Through fiscal year 2013, this represents an estimated positive economic impact to Texas of nearly \$460 million.



CPRIT GRANT PROGRAMS: RESEARCH

Goals, Strategies and Priorities

The goals of the CPRIT research program are:

- To discover new information about cancer that can lead to prevention, early detection and cures;
- To translate new and existing discoveries into practical advances in cancer diagnosis and treatment; and
- · To increase the prominence and stature of Texas in the fight against cancer.

The Institute has sought to support the most creative ideas and the most meritorious projects, without regard to cancer type or geographic distribution. This strategy has been implemented by assembling seven independent peer review panels that evaluate all proposals. The peer reviewers are selected from among the most prominent cancer researchers in the country, outside of Texas. They are charged to assess research proposals on the basis of scientific merit and potential impact on cancer. Each of the seven panels is chaired by a distinguished cancer researcher; together, these chairs make up the Scientific Review Council, chaired by a world-renowned scientist.

The Institute uses a variety of grant award mechanisms to achieve the goals of the research program:

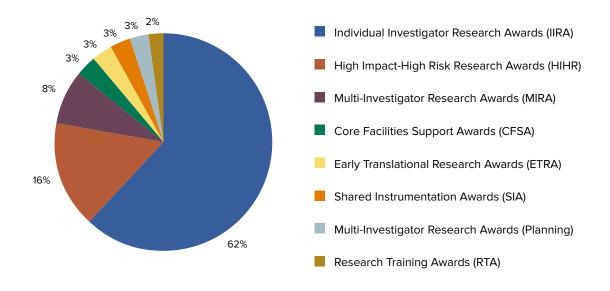
- The Institute supports discovery by funding the research of independent investigators that has the
 potential to reduce the burden of cancer, and by funding innovative projects that are high risk, but
 with high potential impact on cancer;
- Translation of research findings to bring new advances in cancer prevention, diagnosis, and treatment is achieved through the support of individual investigator awards and early translational research awards;
- Multi-investigator research grants stimulate collaboration and bring together researchers and clinicians to work on a common problem in cancer;
- The Institute also funds infrastructure to support cancer research in the form of core facility
 and specialized instrumentation awards, as well as multi-investigator awards to create research
 resources; and
- Building a critical mass of cancer researchers in Texas is addressed by supporting recruitment of
 cancer scientists and clinicians at all levels to academic institutions in Texas and through training
 programs in which pre- and post-doctoral fellows are educated to become cancer researchers.



CPRIT's Research Portfolio

Since its inception, CPRIT has awarded 315 research grants, totaling more than \$458 million in research program funding, along with recruitment grants totaling more than \$169 million to bring 56 outstanding researchers and their teams to Texas. All grants in the portfolio were active as of August 31, 2013.

RESEARCH GRANT DISTRIBUTION BY MECHANISM



As shown in the chart above, the majority (62 percent) of research grants funded by CPRIT support Individual Investigator Research Awards (IIRA). These 195 awards fund individual investigators who propose innovative research projects that will significantly advance knowledge of the causes, prevention, and/or treatment of cancer. These awards are highly competitive; only 10 percent of the applications received to date by CPRIT have been funded. Approximately \$193 million has been awarded to 15 institutions in Texas for the IIRA grant program.

High Impact-High Risk (HIHR) grants (16 percent of the portfolio) fund two-year projects to explore new avenues in cancer research. Only a limited number of applications are accepted from academic institutions and only 13 percent of the applications submitted to date have been funded. Fifty-two HIHR awards have been made to 20 institutions, totaling more than \$10 million.

The remaining 22 percent of the portfolio includes:

 Twenty-five Multi-Investigator Research Awards (MIRA) that fund large-scale, cross-disciplinary research programs requiring both innovation and collaboration. CPRIT has awarded almost \$183 million to these MIRAs, which in turn include 158 individual projects;



As well as the following smaller grant mechanisms that account for \$72 million of CPRIT's research portfolio:

- Eight small MIRA Planning grants to facilitate coordination among institutions submitting comprehensive applications;
- Eight Shared Instrumentation Awards and 11 Core Support Facilities Awards that provide infrastructure to support the cancer research of many investigators;
- Nine Early Translational Research Awards that support projects leading to the development of cancer therapeutic agents, devices, or diagnostics; and
- Seven Research Training Awards that support the training of the next generation of cancer researchers.

Active Research Grant Projects in Fiscal Year 2013 by Award Mechanism				
Award Mechanism	Award Maximum/ Project Duration	Award Mechanism Description	Number of Projects Active FY 2013	Total Award Amounts
High Impact-High Risk Research Awards (HIHR)	- Up to \$200,000 - 2 years	Supports relatively short- term high-impact/high risk projects that are innovative, developmental, and/or exploratory in nature targeting new avenues of cancer research.	52	\$10,342,469
Individual Investigator Research Awards (IIRA)	- Up to \$500,000 - 3 years	Supports innovative research projects directed by one scientist that address critically important questions that will significantly advance knowledge of the causes, prevention, diagnosis, and/or treatment of cancer.	195	\$193,744,261
Multi-Investigator Research Awards (MIRA)	- No maximum with appropriate justification - 5 years	Supports integrated programs of collaborative and cross-disciplinary cancer research among multiple investigators for projects that cannot be effectively addressed by individual researchers or a group or researchers within the same discipline.	25	\$182,736,832
Multi-Investigator Research Awards- Planning	- Up to \$25,000 - 8 months	Support to assist applicants for the Multi-Investigational Research Award to coordinate activities among several institutions submitting comprehensive applications.	8	\$133,845

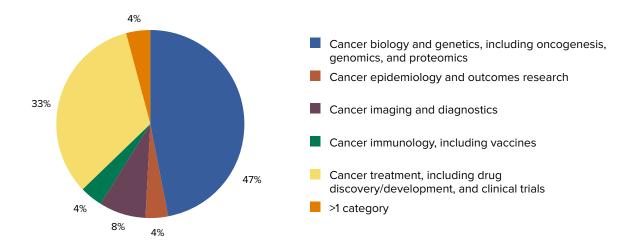


Award Mechanism	Award Maximum/ Project Duration	Award Mechanism Description	Number of Projects Active FY 2013	Total Award Amounts
Research Training Awards (RTA)	- Up to \$750,000/ year - 5 years	Supports training programs for predoctoral (PhD or MD/PhD) and postdoctoral trainees committed to pursuing a career in cancer research. Also supports undergraduate summer research internships and Master's degree-level trainees.	7	\$17,690,538
Shared Instrumentation Awards (SIA)	- Up to \$3M for 1st Year, up to \$300,000 subsequent years - 5 years	Supports the acquisition of major research instrumentation that cannot be requested through other CPRIT programs and whose purchase can be justified on a shared-use basis to support the goals of scientifically meritorious cancer research projects.	8	\$12,436,069
Core Facilities Support Awards (CFSA)	- Up to \$2M for 1st year, up to \$1M subsequent years - 5 years	Supports centralized laboratories performing widely used technologies that serve the needs of multiple researchers.	11	\$33,062,583
Early Translational Research Awards (ETRA)	- Up to \$1M - 1-3 years	Supports projects that "bridge the gap" between the research laboratory and potential clinical applications, such as proof-of-principle research to guide the development of therapeutics, devices or diagnostic assays.	9	\$8,283,557
TOTAL	1		315	\$458,430,154

The subject matter of research grants is broad and encompasses nearly all areas of cancer research. Roughly 47 percent of the funded grants address problems in basic science, 33 percent involve translating research findings into clinical use or products for treating cancer, and the remaining 20 percent address cancer epidemiology and outcomes research, cancer imaging and diagnostics, and cancer immunology including vaccine development.



DISTRIBUTION OF FUNDED GRANTS BY RESEARCH AREA



Recruitment Grants

Building a critical mass of cancer researchers in Texas is addressed by supporting recruitment of cancer scientists and clinicians, at all career levels, to academic institutions in Texas and through training programs in which pre- and post-doctoral fellows are educated to become cancer researchers. Since its inception, CPRIT has supported the recruitment of 56 outstanding cancer researchers to 10 academic institutions in Texas. This program has been highly successful in enhancing Texas' cancer research efforts and increasing the external visibility of the state in this field.

ACTIVE	Active Research Recruitment Grant Projects in Fiscal Year 2013 by Award Mechanism			
Award Mechanism	Award Maximum/ Duration	Award Mechanism Description	Number of Recruits	Total Award Amounts
Recruitment of Established Investigators	- Up to \$10M - 5 years	Support to recruit senior research faculty with distinguished professional careers and established cancer research programs.	14	\$78,715,750
Recruitment of First-Time, Tenure-Track Faculty	- Up to \$2M - 4 years	Support to recruit emerging investigators pursuing their first faculty appointment who have the ability to make outstanding contributions to the field of cancer research.	33	\$64,792,505



Award Mechanism	Award Maximum/ Duration	Award Mechanism Description	Number of Recruits	Total Award Amounts
Recruitment of Missing Links	- Up to \$2M - 5 years	Support to recruit investigators who can fill special and specific needs as critically important members of collaborative research teams.	3	\$5,881,402
Recruitment of Rising Stars	- Up to \$4.5M - 5 years	Support to recruit early- stage investigators who have demonstrated the promise for continued and enhanced contributions to the field of cancer research.	6	\$19,731,000
TOTAL			56	\$169,120,657

Representative Research Program Grants

Recruitment Awards

Nancy Jenkins and Neil Copeland, CPRIT Scholars-Established Investigators (R1113)

Nancy A. Jenkins and Neil Copeland were recruited to The Methodist Hospital Research Institute in Houston in 2011 from the Institute of Molecular and Cell Biology in Singapore. This husband-and-wife team has a long-standing interest in modeling human cancer in mouse models, and their work focuses on providing a better understanding of the genetics of cancer with the hope that new targets for therapy can be identified. By using mutagenesis (the process by which the genetic information of an organism is changed in a stable manner, resulting in a mutation) to induce tumors in a variety of organs in mice, these studies have yielded a large number of candidate genes involved in the initiation, progression, and metastasis of cancer. Drs. Copeland and Jenkins are currently initiating new screens for genes controlling lung and ovarian cancers and determining which genes are responsible for the various stages of cancer development. Drs. Copeland and Jenkins are both members of the National Academy of Sciences, USA, and among the most highly cited biomedical researchers.

Multi-Investigator Research Awards (MIRAs)

Steven McKnight, discovering drugs to treat lung cancer (RP110708)

Lung cancer, with 200,000 new cases being reported every year in the United States, is the deadliest cancer of both men and women in the nation and in most parts of the world. The overall long-term survival rate for all types and stages of lung cancer is only 20 percent. Thus, new therapeutic approaches are urgently needed for the treatment of this disease. This multi-investigator research award, for work led by Steven McKnight of The University of Texas Southwestern Medical Center, enables pursuit of a comprehensive approach to



developing a catalogue of highly validated drug targets and lead compounds to treat non-small-cell lung cancer (NSCLC). A critical asset to this approach is the understanding that lung cancers can be sorted into five to 10 specific sub-categories. This knowledge enables the use of high-throughput drug screening and other forms of genomic and genetic screening to discover chemicals that have selective activity against only one of these sub-categories of lung cancer. Having access to all of the chemical, biological, genetic and informatics disciplines represented in this MIRA led to the discovery of three types of chemicals with activity against specific subtypes of NSCLC, one of which has been shown to inhibit the growth of human lung cancer cells in a mouse model. Additional efficacy studies on these lead compounds are being pursued, along with investigations on their mechanism of action.

High-Impact, High-Risk Awards

George Georgiou, engineering and preliminary evaluation of a fully human, non-immunogenic asparaginase for the treatment of L-Asn auxotrophic cancers (RP120314)

Many cancer cells have genetic defects that lead them to lose the ability to synthesize certain amino acids. Unlike non-malignant cells, these cancer cells have to take up these amino acids from the blood supply. Drug treatments that lead to depletion of the required amino acid from the blood supply starve the tumor, leading to cancer cell death while non-malignant cells that can synthesize that amino acid are unaffected. The most effective way to deplete a specific amino acid in the blood supply is by injecting an enzyme that selectively destroys it. This approach has proven to be highly effective in treating leukemia and other tumors that cannot synthesize the amino acid L-Asparagine. The bacterial enzyme asparaginase is in clinical use and has proved to be extremely effective for the treatment of a variety of leukemias. Because it is a bacterial enzyme, however, it is recognized as a foreign substance by the immune system. Adverse immune responses preclude the use of the bacterial enzyme in many situations. George Georgiou of The University of Texas at Austin is developing a fully human enzyme, which by definition will not be foreign to the immune system. Because humans do not produce asparaginase, modern protein engineering technologies are being used to convert a different human enzyme into an asparaginase. In addition to developing an important new drug, other major benefits from this research include providing critical preliminary results for future grant applications to support clinical development of the new drug, along with providing a catalyst to spur the development of a new approach in protein therapeutics.

For a full list of projects in the CPRIT research portfolio, visit: http://www.cprit.state.tx.us/funded-grants/

Focus of Activities in Fiscal Year 2013

Although no new grant applications were solicited or reviewed during fiscal year 2013, several changes in the review process were implemented during this period. Most notably, six new chairs of peer review committees were recruited and one was reinstated; this enabled reconstitution of the Scientific Review Council (SRC), under the direction of one of the former panel chairs. Most members of the review panels



have also been recruited, in spite of concerns that this might be difficult, considering the upheavals at CPRIT during the past year. Thus, the research program is positioned to move forward with its grant activities in the coming year. Information regarding the panels and chairs can be found on CPRIT's website at http://www.cprit.state.tx.us/grants-process/peer-review-committees/research-appointees/.

Another change implemented during the past year was the development by the three program officers of a formal honorarium policy for all members of the peer review committees. This policy is also available on CPRIT's website. In addition, the process for peer review of recruitment applications has been modified. Criteria for scoring these applications have been developed, and the Requests for Applications have been modified to include these criteria. These applications will now be scored by the SRC members. Based on the newly adopted rules, all Requests for Applications have been revised to incorporate the new requirements.

Finally, in response to a recommendation by the State Auditor, CPRIT has implemented a new process for the review of grantees' annual progress reports. These will now be reviewed by a third-party, independent reviewer, based on specific aims and milestones established by the grant's principal investigator.



CPRIT GRANT PROGRAMS: PREVENTION

Goals, Strategies and Priorities

Since its inception, the CPRIT prevention program has been guided by the following principles:

- Funding Evidence-Based Interventions. CPRIT funds prevention programs and services, for any
 cancer type, that are culturally appropriate for the target population and that are validated by
 documented research or applied evidence.
- Funding across the Prevention Continuum. CPRIT funds quality proposals focused on:
 - Primary prevention: reducing risk or preventing cancer from occurring (e.g. vaccine-conferred immunity, tobacco cessation);
 - Secondary prevention: early detection of cancer to prevent it from spreading and treating diagnosed cases when the opportunity for greatest success exists (e.g., screening/early detection for breast, cervical, and/or colorectal cancer); and
 - Tertiary prevention: reducing risk of recurrence and improving quality of life for survivors and families (e.g., physical rehabilitation/therapy, psychosocial interventions, palliative care).
- Reaching Underserved Populations. CPRIT funds programs and services aimed to help those in most need, including:
 - Underinsured and uninsured individuals, especially those who have never been screened for colorectal, breast, and/or cervical cancer or who have not been screened within five years of the current guidelines;
 - Geographically or culturally isolated populations or those with low health literacy skills;
 - Medically unserved or underserved populations;
 - Racial, ethnic and cultural minority populations; and
 - Any other populations with low screening rates, high incidence rates and high mortality rates.
- Innovating and Evaluating. CPRIT's prevention portfolio aims to build understanding of and capacity
 to deliver effective programs by evaluating and disseminating innovations and best practices that
 address the needs of underserved populations.

CPRIT's Prevention Portfolio

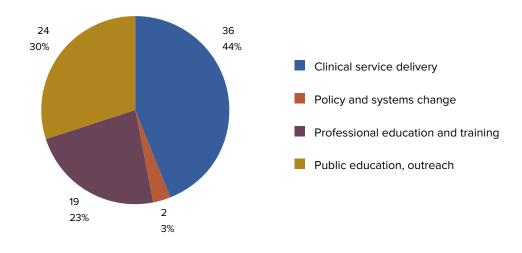
Since 2009, CPRIT has funded 105 prevention grants to date, 81 of which were active during fiscal year 2013. The active evidence-based projects, accounting for a total of \$79,476,575 in funding, have been awarded through the following mechanisms:



ACTIVE PREVENTION GRANT PROJECTS IN FISCAL YEAR 2013 BY AWARD MECHANISM				
Award Mechanism	Award Maximum/ Project Duration	Award Mechanism Description	Number of Projects Active during FY 2013	Total Award Amounts
Cancer Prevention Microgrants (CPMG)	- Up to \$150,000 - 2 years	Supports programs focusing on improving systems and removing barriers that increase the delivery of primary and secondary preventive services.	3	\$596,441
Evidence- Based Cancer Prevention Services (EBP)	- Up to \$3M - 3 years	Supports evidence-based services in primary, secondary and/or tertiary cancer prevention.	40	\$65,672,199
Behavior Change Through Public and Professional Education and Training (PPE)	- Up to \$500,000 - 3 years	Supports health promotion, education and outreach of the public and/or training of professionals for primary, secondary and tertiary cancer prevention that will improve health behaviors related to cancer.	38	\$13,207,935
TOTAL ACTIVE FY 2013		81	\$79,476,575	
Prior Year (closed)	Prior Year (closed) Grants		24	\$17,200,229
Total Grants to Date		105	\$96,676,804	

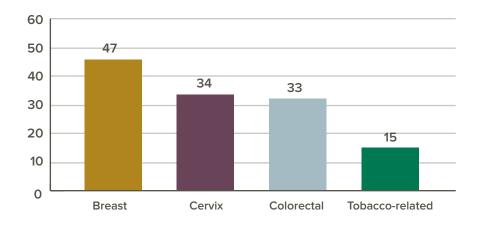
The following charts illustrate the distribution of these projects by type, cancer site and geographic location. Projects may address more than one focus area or cancer site.

NUMBER OF ACTIVE PROJECTS BY PRIMARY FOCUS AREA

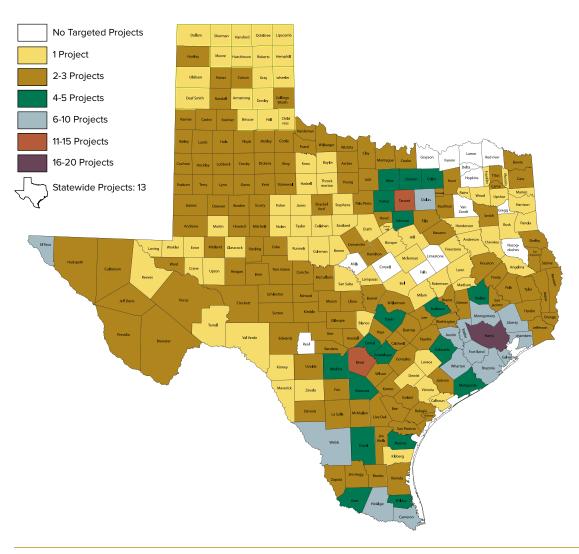




NUMBER OF ACTIVE PROJECTS BY CANCER SITE



Counties Served by CPRIT Prevention Projects (81 Active Projects during FY 2013)





Prevention grantees report quarterly and annually on their progress. Based on grantee reports, since its inception, the CPRIT prevention program has supported programs serving more than 1,365,000 Texans. Of these:

- 794,386 Texans have been served by education and training programs. According to grantee reports, these projects in the CPRIT prevention portfolio have led to:
 - 1,251 Texans scheduling or receiving a preventive vaccination;
 - 11,604 Texans taking steps to quit smoking;
 - 30,385 Texans improving their behaviors related to healthy living and obesity control; and
 - 21,488 Texans scheduling or receiving screening and diagnostic services.
- 570,915 Texans have received clinical services. According to grantee reports, these projects in the CPRIT prevention portfolio have led to:
 - 11,756 prevention vaccinations;
 - 167,643 Texans receiving tobacco cessation services;
 - 15,974 Texans receiving genetic testing and counseling;
 - 9,994 Texans receiving survivor care; and
 - 319,436 screenings and diagnostics for breast, cervical and colorectal cancer. Of these:
 - 113,116 recipients had never before been screened;
 - 23,241 abnormal results were identified;
 - 1,897 cancer precursors were detected; and
 - 811 cancers were detected.

Representative Prevention Program Grants

Gail Tomlinson and David Euhus, genetic testing (PP110220 & PP120089)

State-of-the-art genetic testing services can be a true lifeline for Texans who may be genetically predisposed for developing cancer. With support from CPRIT, The University of Texas Health Science Center at San Antonio and The University of Texas Southwestern Medical Center are now bringing genetic testing to communities in south and north Texas that lacked these services. When "Connie" (assumed name), a 42-year-old woman from north Texas, was diagnosed with colon cancer, her care team directed her into a hereditary screening program. The tissue from Connie's tumor was analyzed and results showed she carried a gene mutation known as MSH2, which has an associated risk with uterine cancer. Because of her increased risk, it was recommended that Connie have a prophylactic hysterectomy. Connie agreed to the surgery, and her choice may have saved her life. The hysterectomy revealed an early-stage treatable uterine cancer. Genetic testing services have benefited Connie's family members as well. Several of them have tested positive for the familial mutation and are now receiving high-risk monitoring services.



Navkiran Shokar, colorectal screening (PP110156)

Each year, approximately 245 people in El Paso County are diagnosed with colorectal cancer. Hispanics in this area are particularly at risk, with incidence and mortality rates for colorectal cancer that are higher than for Hispanics in the rest of the state. To reduce the burden of cancer in this community, Texas Tech University Health Sciences Center at El Paso and more than 20 academic and community-based organizations throughout El Paso County have come together to develop Project ACCION, a bilingual program that provides free education and screening services for qualifying participants. ACCION also provides help with scheduling, transportation and accessing treatment services. Entering its second year with CPRIT funding, the program is already having an impact. To date, thousands have received education and screening. Thirty-six people were found to have adenomas, small lesions in the colon that can develop into cancer, and were treated. In addition, seven people were found to have cancer and were steered into treatment. Many of these people had never before been screened.

Belinda Reininger, professional and public education (PP110163)

When The University of Texas Health Science Center at Houston identified a need for an evidence-based cancer prevention program to serve low-income, uninsured or underinsured Hispanics living in Cameron, Hidalgo, Galveston, Nueces and Webb counties, it decided to use a two-step approach: train promotoras (community health workers) from these counties using a state-approved curriculum and then work with the promotoras to deliver evidence-based outreach and education to the community. For people like "Marta," the CPRIT-supported program has been life-changing. "My life was always about taking care of everyone else...my husband, my kids, my parents. Sure, I wanted to lose weight, but I never thought it was a matter of life and death...I realized how connected my bad eating habits, and extra pounds are with some serious diseases, like diabetes, and even cancer! The promotoras really motivated me because they have been through what I have...I've learned how important it is to take care of myself, which means waiting at the clinic for my annual exams, even if it makes me uncomfortable. My health really does matter!"

For a full list of projects in the CPRIT prevention portfolio, visit: http://www.cprit.state.tx.us/funded-grants/



CPRIT GRANT PROGRAMS: PRODUCT DEVELOPMENT

Goals, Strategies and Priorities

CPRIT's product development program is designed to accelerate the progression of new cancer drugs, diagnostics, and therapies from the laboratory into clinical practice. The objectives of CPRIT's product development program are:

- To improve patient care through expedited innovation and product development;
- To foster economic development in Texas' emerging life sciences industry and the creation of highquality new jobs in this state; and
- To provide a direct return, through intellectual property and revenue sharing, on the investments made by the people of Texas.

CPRIT funds scientifically meritorious product development projects based on the potential for translating research discoveries into products that can help cancer patients. In addition to the scientific peer review process used by all CPRIT initiatives, product development proposals are subjected to a thorough due-diligence analysis to evaluate the applicant's regulatory plan and business operations capacity.

CPRIT uses a variety of grant award mechanisms to fulfill its objectives. The three award types include:

- Company Awards supporting Texas-based companies that have undertaken at least one round of
 professional institutional investment in developing marketable oncology products or services;
- Company Formation Awards assisting new start-up companies, with no previous rounds of
 professional institutional investment, seeking to develop marketable oncology products or services
 (companies that are not already based in Texas must relocate to the state before receiving CPRIT
 funding); and
- Company Relocation Awards targeting companies based outside of the state that have conducted at least one round of professional institutional investment (these companies must relocate to Texas to develop commercially oriented oncology products or services with CPRIT funding).

CPRIT's Product Development Portfolio

Eleven Texas-based companies have received CPRIT product development awards. Two more companies received research awards in January 2010 prior to the launch of CPRIT's commercialization program. The 13 CPRIT-funded company projects include promising drugs, diagnostics, and devices targeting a variety of cancers, including cancers of the blood (leukemia, lymphoma and myeloma), colon and rectum, esophagus, stomach, lung, and prostate. Some of the CPRIT-funded companies are developing approaches applicable to multiple cancer types.



CPRIT's product development portfolio totals \$98 million. Together with the companies' required matching funds, total investment in research and development for the 13 CPRIT-funded company projects exceeds \$150 million. In addition to creating new and improved tools and treatments for fighting cancer, CPRIT's investments are helping to build Texas' life-science industry. While bringing a product to market can take time, jobs and economic activity are generated throughout the process. Projects funded by CPRIT are expected to create approximately 140 direct jobs — highly skilled, high-wage positions in life sciences — in Texas over the three-year term of CPRIT's grant awards.

Every CPRIT award includes an intellectual property agreement that specifies a revenue return to the State of Texas from the successful development of CPRIT-funded drugs, devices, diagnostics or services. These revenue-sharing standards provide a fair return on Texas' grant funds without impeding the ability of the company to attract future investment. Like any interested investor, CPRIT is an engaged partner and holds award recipients accountable for their efforts to bring products to market.

As of August 31, 2013, 10 CPRIT-funded company projects were active, out of 13 grants that had been awarded since CPRIT's inception. One company – Apollo Endosurgery – completed work on its CPRIT-funded project prior to fiscal year 2013. Two other companies' grants were frozen during fiscal year 2013 – Kalon Biotherapeutics due to the CPRIT grant moratorium, and Peloton Therapeutics awaiting review of its application.

ACT	ACTIVE PRODUCT DEVELOPMENT GRANT PROJECTS IN FISCAL YEAR 2013 BY AWARD MECHANISM			
Award Mechanism	Title	Entity	Cancer Type	Amount
	Biobetter Cancer Monoclonal Antibody Program	Caliber Biotherapeutics	Leukemia, Lymphoma	\$12,808,151
Company Award	Novel targeted biologics, Engineered Toxin Bodies (ETB), as cancer therapeutics	Molecular Templates, Inc.	Lymphoma	\$10,600,000
	Clinically Actionable Mutation Profiling for Cancer Personalized Medicine using Scalable, Ultra-deep Next Generation Sequencing	Asuragen, Inc.	All Sites	\$6,837,265
	Cancer Treatment Including Drug Discovery/Development and Clinical Trials	Mirna Therapeutics, Inc.	Basic Science, Multiple Sites	\$10,297,454
	Cancer Biology and Genetics Including Oncogenesis Genomics and Proteomics	Rules-Based Medicine	Multiple Sites	\$3,024,432



Award Mechanism	Title	Entity	Cancer Type	Amount
	Clinical Development of CaspaClDe, a Cell Therapy Safety Switch	Bellicum Pharmaceuticals, Inc.	Leukemia, Lymphoma, Myeloma	\$5,680,310
Company Award	MRI-Guided Laser Therapy for Targeted Treatment of Localized Prostate Cancer	Visualase, Inc.*	Prostate	\$2,151,776
	Enrichment Filter and Point- of-use Assay Platform for Detection of Circulating Tumor Cells	Ingeneron, Inc.*	Multiple Sites	\$198,111
Subtotal: Activ	Subtotal: Active Company Awards			\$51,597,499
Company Formation	Expanding the Market and Success Rates for Myeloablative Cancer Treatments Using PUL-042, an Innate Immune Stimulant	Pulmotect, Inc.	Breast, Leukemia, Lymphoma, Ovary	\$7,126,398
Company Relocation	TexCITE (Texas Cancer ImmunoTherapy Enterprise): Focused development of innovative cell therapies for cancer	Cell Medica	Lymphoma, Other	\$15,571,303
TOTAL ACTIVE FY 2013		10	\$74,295,200	
Inactive/Closed		3	\$23,704,800	
Total Grants to Date		13	\$98,000,000	

^{*} Companies that received research awards in January 2010 prior to the launch of CPRIT's commercialization program.

Representative Product Development Program Grants

Company Formation Awards

Pulmotect, expanding the market and success rates for myeloablative cancer treatments using PUL-042, an innate immune stimulant (CP120014)

Pulmotect's technology is designed to boost the immune system of the lungs. For cancer patients, this could help prevent and treat pneumonia, a leading cause of death during periods of immunosuppression. In addition, cancer treatments may be improved by reducing the risk of respiratory infections. Multiple indications exist beyond use with immunosuppressed patients, including asthma, pandemic threats and bioterrorism. With its first year of CPRIT funding, the company is on track to complete pre-clinical milestones to support upcoming clinical trials. This has included manufacturing the drug for human use, conducting final animal testing, and conducting regulatory meetings with the FDA. According to Pulmotect, "CPRIT funding has allowed us the



ability to focus on developing the technology and advancing it to the clinic as quickly as possible to help save lives." Since receiving the CPRIT award, Pulmotect has raised an additional \$3.5 million in grants and equity investments.

Company Awards

Bellicum, clinical development of CaspaCIDe, a cell therapy safety switch (RP110508)

Bellicum is developing a combination product for adult and pediatric leukemia or lymphoma patients undergoing hematopoietic stem cell transplantation (HSCT). The product under development contains Bellicum's CaspaClDe safety switch, which allows rapid resolution of Graft-versus-Host Disease should it occur. This approach promises to reduce transplant-related morbidity and mortality for patients who have a matched donor, as well as making HSCT a viable option for the 50 percent of transplant candidates who are currently ineligible because they do not have a matched donor. During the past year, Bellicum has initiated a Phase 1/2 clinical trial. Six U.S. clinical trial sites are open for enrollment, including two in Texas, with a parallel trial at a third Texas site in negotiation. The company reports that the diligence conducted by CPRIT and its funding award have allowed Bellicum to attract new investors for its second round of professional institutional fundraising, totaling \$34 million.

Asuragen, clinically actionable mutation profiling for cancer personalized medicine using scalable, ultradeep next generation sequencing (CP120017)

Next-generation sequencing is revolutionizing diagnostic and therapeutic approaches in oncology. Asuragen's CPRIT-funded project for next-generation sequencing technology pinpoints molecular changes in cancer patients that can guide clinical care and help accelerate targeted drug development through clinical trials. By commercializing assays that identify "druggable" mutations in cancer genes, Asuragen's innovations can improve the selection of patients likely to respond to emerging therapies in cutting-edge clinical trials, along with improving surgical decisions and helping to individualize treatments with existing anti-cancer drugs that can increase survival, reduce morbidity, and optimize quality of life. In its first year of funding, Asuragen launched SuraSeq® 500 in Asuragen's CAP-accredited CLIA laboratory, a targeted next-generation sequencing clinical test that identifies more than 500 known cancer mutations using low inputs of DNA from patient cancer biopsies. This launch satisfied the most significant milestone among the company's Year 1 activities. The company also commercialized QFI®-PCR, a next-generating sequencing-based sample quality control tool, and SuraSight®, an optimized bioinformatic pipeline and user-friendly graphical interface for analyzing and interpreting sequencing data. As the first revenues from the commercialization project were generated, Asuragen made its first royalty payment to CPRIT. The company characterizes the CPRIT funding award as "critical to expanding Asuragen's pharmacogenomics services business through technology innovations for clinical research, and the development of comprehensive procedures, quality metrics, and controls that can support both diagnostic services and product development. Next-generation sequencing is the fastest growing category of Asuragen services, and CPRIT-funded resources have been integral to



sequencing-based diagnostic assay development, hiring and retaining top talent, recruiting additional capital, and supporting commercialization opportunities that can advance personalized medicine in oncology." Since receiving the CPRIT award, Asuragen has raised \$15 million in additional capital.

For a full list of projects in the CPRIT product development portfolio, visit: http://www.cprit.state.tx.us/funded-grants/



CPRIT PEER REVIEW

Rigorous, independent merit-based peer review is the foundation of all of CPRIT's grant programs and the primary means for ensuring that the Institute wisely invests the funds committed by the people of Texas to research, product development, and prevention programs with the greatest potential impact on cancer. From the Institute's initiation, the peer review process has included multiple safeguards to address potential conflicts of interest and ensure both fairness and accountability. Further enhancements were made to the process in fiscal year 2013 pursuant to the recommendations of the State Auditor and the provisions of Senate Bill 149.

The table below shows the process in effect for prevention and research grants as of the end of fiscal year 2013. Additional changes to the process, such as the creation of the CPRIT Program Integration Committee, which have gone into effect in fiscal year 2014, will be incorporated in further reporting. Revisions to the peer review process for research recruitment and product development grants are also in progress.

CPRIT PREVENTION AND RESEARCH PEER REVIEW PROCESS

STEP 1 RFA Release	CPRIT releases a Request for Application (RFA) via website, subscribers to CPRIT's email newsletter and the Texas Register.
STEP 2 Application Submittal	Applicants submit their proposals using CPRIT's online application receipt system (www.cpritgrants.org). Applicants must include information about all sources of funding, including private investors, already invested with the applicant. Applicants must certify that they have not donated to the CPRIT Foundation.
STEP 3 Initial Review	Applications undergo an initial administrative compliance review to determine that all applications are complete and in compliance with the RFA. The Chief Officer and Review Council Chair may make final compliance decisions.
STEP 4 Reviewer Conflict of Interest Identification	Review panels are recruited from a pool of experts and advocates (for Prevention) and constituted with the approval of the panel chairs. The panelists review a short non-confidential summary along with a list of personnel and all sources of funding for the project for every application. Reviewers report which applications match their area of expertise and flag potential conflicts of interest. If a reviewer's conflict of interest falls into a certain category, then the reviewer is excused from the entire review cycle. > Members of the review panel sign a conflict of interest agreement that defines financial, professional, and personal conflict of interests.



STEP 5 Refer to Review Committee	Applications are assigned to individual reviewers to match reviewers' identified areas of expertise. Because of volume, some research applications undergo a triage Review where applications judged by reviewers to offer only modest contributions to the field of cancer research are excluded from further peer review. A reviewer with a conflict does not participate in the discussion, presentation, or scoring of the application at any point in the process.
STEP 6 Submission of Preliminary Scores	Three experts from the panel plus one advocate (for Prevention) conduct a rigorous review of the application and assign preliminary scores. Based on the scores, the Chair decides which proposals will proceed to the next step. All reviewers must live and work outside of Texas.
STEP 7 Review Panel	The review panel discusses the applications. Based on the discussion, the peer reviewers submit their scores online. The initial reviewers may modify their scores at this point. Any reviewer with a conflict of interest for a particular application recuses himself/herself for that portion of the discussion and the scoring of that application.
STEP 8 Final Scoring	A final score and a summary statement of the reviewers' comments are generated for each application.
STEP 9 Final Review	The Review Council, consisting of the Chair and panel chairs, considers the recommendations put forth by the panels and, after programmatic review, creates a final list of proposals to recommend for CPRIT funding. The Council's written recommendations include specific reasons for selecting the applications, which are provided to both the Executive Director and the Oversight Committee (OC). Once the awards are announced, the written recommendation is posted on CPRIT's website. > Once the review process is complete, all reviewers sign a statement that they
	have followed the terms of the CPRIT conflict of interest agreement.
STEP 10 Oversight Committee	The CPRIT Executive Director presents the slate of recommended grant awards to the Oversight Committee at an open meeting, along with an affidavit that each application complied with CPRIT's submission and review process. The CPRIT Compliance Officer also certifies the slate of recommended awards. The OC considers the slate of recommended awards and may disapprove a slate if eight of the 11 OC members vote to do so. The list of all sources of funding for the proposed awards is publicly announced.
STEP 11 Grant Award Contract	Grant awards ratified by the OC must then undergo a contract phase wherein all responsibilities and obligations of the award recipient are carefully delineated. Funding is not guaranteed until a contract is signed.

Notes:

- 1. Changes made based on State Auditor's Office audit report are in bold.
- 2. Researcher recruitment awards have followed a different process. The chief scientific officer will evaluate and recommend a new process to the compliance officer and executive director.



Review Councils

The Institute's three review councils — the Scientific Review Council, Prevention Review Council, and Product Development Review Council — oversee the peer review of all applications submitted to CPRIT. Members of the review councils chair the peer review committees within each program area. The councils assess the evaluations completed by the peer review committees and create a final list of proposals recommended for CPRIT grant awards.

Under the process in effect through fiscal year 2013, these lists were submitted to the CPRIT executive director, who prepared slates for consideration by the Oversight Committee, which could disapprove an entire slate by a two-thirds vote of its membership. Pursuant to Senate Bill 149, in the future the review councils will submit their lists of recommendations simultaneously to the CPRIT Program Integration Committee and the Oversight Committee. The Program Integration Committee then forwards its final recommendations to the Oversight Committee, which will individually approve awards.

Scientific Review Council members:

http://www.cprit.state.tx.us/grants-process/peer-review-committees/research-appointees/

Prevention Review Council members:

http://www.cprit.state.tx.us/grants-process/peer-review-committees/prevention-appointees/

Product Development Review Council members:

http://www.cprit.state.tx.us/grants-process/peer-review-committees/commercialization-review-members



CPRIT COMPLIANCE PROGRAM

In December 2012, the CPRIT Oversight Committee established the agency's compliance program, which was later codified by statutory changes included in Senate Bill 149 as passed by the 83rd Texas Legislature, mandating a program "to assess and ensure compliance by the Institute's committee members and employees with applicable laws, rules and policies." Implementation of the program has taken place during fiscal year 2013. Significant elements of CPRIT's compliance program include:

Compliance Verification of CPRIT's Product Development Grants

The Institute's compliance officer conducted a compliance review in September 2012 of all companies awarded funding under CPRIT's commercialization program (now the product development program). The review focused on the grant application and review process each company underwent — from application to presentation to the Oversight Committee. During that review, the agency's commercialization officer revealed that one company, Peloton Therapeutics, had not undergone the required review process before being presented to the Oversight Committee for award ratification. Funding was frozen under the grant contract while the issue was investigated. The executive director publicly announced the findings at the December 5, 2012, Oversight Committee meeting.

Comprehensive Compliance Verification for all CPRIT Grants

The compliance program completed a number of special requests for the 83rd Texas Legislature. To respond to Legislative inquiries and provide compliance assurances with the Institute's statute and rules, each of the agency's 498 grants awarded to date was examined for compliance with the agency processes and procedures in place at the time of award. All grants examined were found to be in compliance under those criteria.

Creation and Implementation of the Grant Pedigree for Each Grant Application

Beginning with the award slates ratified by the Oversight Committee in December 2012, the compliance officer created a "grant pedigree" detailing the CPRIT processes each grant application must follow. This pedigree provides documentation and assurance to the Oversight Committee that each grant award has met statutory, rule and Institute procedures. The pedigree will continue for the life of each grant and document subsequent grant monitoring and compliance with contract terms and conditions.



Cross-check Review of CPRIT Foundation Donor Funds

Another special project undertaken in fiscal year 2013 was to identify if any donor to the now-dissolved CPRIT Foundation was an "employee, officer or director" of a CPRIT grantee. The General Appropriations Act, 82nd Legislature, prohibited such donors from receiving grants, but no process was in place to cross-check CPRIT grantees against donor lists. Where such matches were found, CPRIT Foundation funds were returned to the donor.

Risk Assessment

Together with CPRIT's internal auditor Grant Thornton LLP, CPRIT staff performed a top-to-bottom risk assessment of the Institute. A prior risk assessment, completed shortly after the agency was created, had been limited in scope to the initial grant application process and early operational processes. After several years of operation and nearly 500 grant awards, a more comprehensive risk assessment was merited. The assessment included an online risk survey of Oversight Committee members, agency staff, peer reviewers and grantees; participants were asked to rank identified risks and propose actions that would mitigate and control the identified risks. The Institute is working to develop risk mitigation monitoring and management plans for the most significant risks. Once completed, follow-up risk assessment will be performed annually as the risk environment changes.

Grant Monitoring Program

Changes enacted by the 83rd Legislature require the Institute to continuously monitor and ensure that each grant recipient complies with the terms and conditions of its grant contract. The Institute's grant monitoring program includes desk-reviews, on-site visits and programmatic reviews. A newly instituted electronic grants management system is designed to notify the grantee of report due dates, track the dates on which grant recipient reports are submitted for review, and provide the ability to generate reports to determine compliance with these requirements. Additionally, grantee progress reports have been revised to include compliance elements.

Reconciliation Project for Past Due Reports

CPRIT initiated a reconciliation project on March 25, 2013, to provide grant recipients the opportunity to become current on outstanding reporting obligations. Timely grantee reports are critical for measuring the grant project's performance and achieving financial certainty for the Institute. The goal of the reconciliation project was to assist grant recipients in achieving 100 percent reporting compliance for all required reports before standards and penalties became effective with the implementation of new administrative rules in fiscal year 2014 and beyond. Maximizing the number of current reports also increases the accuracy of projected bond issuance schedules and enhances CPRIT's grant monitoring responsibilities. Agency financial and



programmatic staff resources were dedicated to reviewing and reconciling all outstanding reports submitted during the reconciliation period, which was extended until July 31, 2013, to accommodate the number of reports submitted. There was a significant response by grantees to this opportunity.

Conflict of Interest Information for Fiscal Year 2013

A moratorium on CPRIT operations was imposed by state leadership on December 18, 2012, that remained in effect for the remainder of fiscal year 2013. Consequently, the grants announced on December 5, 2012, were the only grants awarded in fiscal year 2013. The following information is applicable for grants awarded in fiscal year 2013:

- A list of conflicts of interest that require recusal: See Appendix
- Any unreported conflicts of interest confirmed by an investigation conducted by CPRIT: None
- Any waivers to CPRIT's conflict of interest rules: None



FINANCIALS

Financial Summary (Unaudited) - For the Year Ended August 31, 2013						
Revenues						
Legislative Appropriations	\$297,030,446					
License, Fees and Permits	\$235,910					
Interest Income	\$1,516					
Other	\$34,052					
Total Revenues	\$297,301,924					
Expenses						
Salaries and Wages	\$2,255,715					
Other Personnel Cost	\$111,088					
Professional Fees and Services	\$8,291,948					
Consumable Supplies	\$19,163					
Utilities	\$49,778					
Travel	\$54,967					
Rent - Building	\$421,586					
Rent - Machine and Other	\$164,500					
Other Operating Expenses	\$305,458					
Grant	\$123,137,056					
Capital Expenditures	-					
Total Expenses	\$134.811.258					
Excess of Revenues Over Expenses	\$162,490,666					



Financial Position

Executive management of CPRIT is responsible for establishing and maintaining adequate internal control over financial reporting and compliance with certain provisions of laws, regulations, contracts, and grant agreements, as well as other matters.

McConnell & Jones LLP, a public accounting firm, audited CPRIT's financial statements for the year ended August 31, 2013, ascertaining that the statements "present fairly, in all material respects, the respective financial position of the governmental activities and governmental funds information of CPRIT as of August 31, 2013, and the respective changes in financial position for the year then ended in accordance with U.S. GAAP."

As part of the audit of the financial statements, McConnell & Jones LLP performed tests of CPRIT's compliance with certain provisions of laws, regulations, misstatements, contracts, and grant agreements to ensure that that the statements are free from material misstatements. McConnell & Jones LLP reported areas of noncompliance or other matters required to be reported under Government Auditing Standards but expressed no opinion on these matters because they were not within the objective of the audit.



PLANNING

Texas Cancer Plan

The Texas Cancer Plan (V.T.C.A., Health and Safety Code, Section 102.002) aims to reduce the cancer burden across the state and improve the lives of Texans. As the unmistakable call to action for cancer research, prevention and control, the Plan identifies the challenges and issues that affect Texas and presents goals, objectives and strategies to help inform and guide communities in the fight against cancer. The intent is to provide a coordinated, prioritized and actionable framework to guide efforts to mitigate the human and economic burden of cancer in Texas. The Texas Cancer Plan is developed with input provided from organizations and institutions, community leaders, planners, coalition members, cancer survivors, and family and friends affected by cancer.

The Plan was significantly revised and re-released in April 2012. The plan outlines 16 specific goals with measureable objectives, baselines and targets for change. It also identifies five high-impact priority areas for 2012-2016, each poised to yield significant returns over the next four years. The areas were selected based on cancer trends, health disparities and available evidence-based strategies. They are:

- Decreasing tobacco initiation and use, and exposure to second hand smoke;
- · Increasing screening and early detection for breast, cervical, and colon and rectum cancers;
- Reducing pain and suffering from cancer through coordinated supportive care;
- Reducing cancer health disparities; and
- Increasing opportunities to access and participate in clinical trials.

By statute, CPRIT is charged with facilitating the development of the Plan and supporting its implementation. However, the overall outcome and success of the Plan depends on the cooperation, collaboration and resources of many stakeholders throughout Texas. The Institute's strategic direction and funding opportunities align with the Plan but will, by necessity, be a subset of the overall implementation of the Plan.

CPRIT Strategic and Financial Plan

Throughout CPRIT's existence, the Institute and its Oversight Committee have sought to fund the most meritorious projects from Texas scientists, clinicians, institutions and organizations through a variety of grant mechanisms, within the funding criteria identified by statute, by the Institute, and within each Request for Applications. Going forward, this process will be enhanced by the Oversight Committee's approval of program priorities that will inform CPRIT's grant-making over several application cycles and ensure that Texans' investments in cancer research and prevention are aligned to make the largest positive impact for patients, families, survivors and communities.



Research

The Institute fosters cancer research in Texas by providing financial support for a wide variety of cancerrelated research projects. Impact is the single most important criterion for the award of CPRIT funding. Will the proposal, if successful, change the way that other scientists think about and conduct their own research? Will it change the way that physicians evaluate and treat their patients?

The potential for scientific discoveries that will make a meaningful difference to cancer patients can occur at any stage in the research process. Rather than focusing on specific areas of cancer research, CPRIT encourages innovation by offering several types of grants that address research at various development stages, spanning the spectrum from basic science to translational research and clinical applications. Similarly, research grants awarded by the Institute vary in amount and duration – from the relatively modest short-term projects targeting early-stage ideas to the complex, multi-year research programs at several laboratories and research facilities throughout the state that may take a life-saving drug through its final stages of development.

To stimulate a diverse portfolio of cancer research projects, CPRIT issues Requests for Application tailored to support particular projects, including projects led by a single investigator, multi-disciplinary collaborative scientific and clinical teams, or research projects undertaken at public and private companies in Texas. CPRIT has initiated several awards to enhance and expand the research infrastructure of the state. One such award is a CPRIT Scholar in Cancer Research program to recruit exceptional researchers to Texas universities and/or cancer research institutions to enhance innovative programs of excellence by providing scientific and programmatic support for promising first-time, tenure-track faculty; scientists with a critical expertise to enhance a collaborative research team; as well as rising stars and established outstanding scientific investigators. This program together with cancer research training awards for undergraduate and graduate students at Texas academic institutions should enhance Texas' research capability for years to come.

CPRIT requires every research award recipient to certify that it has its own funds dedicated to the project. The recipient's matching funds must equal at least one-half of the Institute's grant award and be spent on the same area of cancer research. Matching funds may be raised from investors, contributed by donors, or acquired through other federal, state or non-profit grant programs.

Prevention

The Institute's prevention grant awards make it possible for prevention strategies and services to reach many more Texans and ultimately decrease the burden of cancer. The Institute funds both the delivery of prevention and early detection programs and services, and also funds research into better means of prevention and early detection.

The ability to reduce cancer death rates depends, in part, on more broadly applying some of the strategies currently available. Effective evidence-based strategies exist but are currently not being deployed in all communities in Texas. Through prevention programs, CPRIT invests in building understanding of and the capacity to deliver effective community-based interventions so that new technologies and services are made available to all, especially those who have historically been underserved.



Despite successes in reducing cancer incidence and mortality, Texas cannot become complacent and should increase the rate of progress of cancer prevention and early detection. Unique projects and new partnerships that will apply evidence-based programs and services in novel ways are necessary to increase rates of recruitment, provision of services, early detection and ultimately survival rates.

Specifically, CPRIT seeks to fund projects that will:

- Offer effective and efficient prevention programs and services based on the existing body of knowledge about and evidence for cancer prevention in ways that exceed current performance in a given service area;
- Provide tailored, culturally appropriate, and accurate information on early detection and prevention to the public that results in sustained behavior change and a direct health impact that can be measured;
- Provide effective and innovative outreach strategies to educate the public and increase recruitment
 into appropriate clinical screening and survivorship programs and services that demonstrate increased
 rates of early-stage cancer diagnosis and improved quality of life;
- Provide access to state-of-the-art preventive services to individuals;
- Target delivery of preventive services to areas and populations in the state with the greatest need; and
- Deliver evidence-based survivorship services aimed at reducing the after-effects of cancer diagnosis and treatment.

Population priorities include:

- Underinsured and uninsured individuals focusing on individuals who are significantly out of compliance with nationally recommended screening guidelines;
- Geographically or culturally isolated populations;
- Medically underserved or unserved populations;
- · Populations with low health literacy skills;
- · Racial, ethnic, and cultural minority populations; and
- Any other populations with low screening rates, high incidence rates, high cancer risk factors and high mortality rates.

Product Development

Because groundbreaking research is most valuable when it can be translated into products that are available to Texans, a crucial component of the Institute's mission is to create and support infrastructure that accelerates the movement of new cancer drugs, diagnostics and therapies from the laboratory to the patient. The Institute's ability to promote product development pathways distinguishes it from more traditional cancer research funding sources.



By engaging the private sector and encouraging entrepreneurial approaches, Texas should see a return on its investment in research and enhance the opportunities for breakthrough cancer-related technologies. This benefits Texans in a variety of ways, including the introduction of new products; the creation of new, highly skilled jobs; increased economic activity; enhanced state revenues; and reduced health care costs and lost productivity.

The guiding principles of the product development program are three-fold:

- · A significant improvement in cancer patient care as a result of our efforts;
- A substantial impact on economic development in Texas; and
- High returns from the investments made in product development.

New products and increased economic activity are realized when knowledge gained by CPRIT researchers is brought into the public domain through intellectual property agreements that encourage additional investment from the private sector to develop and commercialize new products. Texas law requires all grant award contracts issued by the Institute to include an intellectual property agreement that allows the state to collect royalties, income and other benefits realized as a result of Institute-funded projects. The Institute's intellectual property policies are designed to promote the efficient and diligent development of diagnostics and therapies into new products that benefit Texans.

CPRIT's product development awards are designed to find and fund innovative companies already in the state or willing to relocate to Texas to develop promising new therapies and to build and sustain the state's life sciences infrastructure. Eligible stages of development for these awards include translational research, proof-of-concept studies, preclinical studies, and Phase I or Phase II clinical trials. Phase III clinical trials and other later-stage projects will be considered where circumstances warrant CPRIT investment.

Strategic Direction and Priorities

The Institute has followed the lead of organizations such as the National Cancer Institute (NCI), the American Cancer Society, the LIVESTRONG Foundation, and Susan G. Komen for the Cure to establish a scientific peer review process through which all research and prevention grant proposals are thoroughly vetted and scored. Scientific peer review provides an objective evaluation of the proposed hypothesis, methodology to prove the hypothesis, and prospective findings. Because CPRIT makes awards only to organizations in Texas, it recruits scientific experts who live and work outside of Texas to participate on the peer review panels to reduce any potential conflict of interest between the reviewers and the proposals under review.

The National Cancer Institute (NCI) has officially designated CPRIT as a NCI-approved funding entity. This certification involves a comprehensive assessment of CPRIT's peer review process to ensure that it conforms to National Institutes of Health standards, including conflict of interest protections.

The Institute's designation as a NCI-approved funding entity is important because it means that the four comprehensive cancer centers in Texas are able to include CPRIT research grant funding as part of their



research base calculations to maintain or earn NCI Cancer Center designation. This enhances Texas' ability to leverage additional federal funding for cancer research and raises Texas' profile as a center for cancer research.

Any research proposals received from companies require an additional due diligence review to determine if a commercial path for the prospective discovery exists to make it available in health care practice to cancer patients for treatment or to the general population as a preventive measure, such as a vaccination. This review is unique to CPRIT among cancer grant-making organizations and ensures that CPRIT only invests in research on discoveries with the highest probability of reaching and benefiting Texans as soon as possible.

The Institute outsources the management of its online application system and proposal review process along with the coordination of its peer review meetings to SRA International, Inc. SRA International's depth of scientific and information technology expertise has efficiently and effectively supported CPRIT's processes from the beginning of the grant cycle with Requests for Applications to the end with peer reviewers' recommendations.

Funding decisions for research awards are based on 10 core principles laid out in state law (Texas Health and Safety Code, Chapter 102). These principles address funding proposals that:

- Could lead to immediate or long-term medical and scientific breakthroughs in the area of cancer prevention or cures for cancer;
- Strengthen and enhance fundamental science in cancer research;
- Ensure a comprehensive coordinated approach to cancer research;
- Are interdisciplinary or interinstitutional;
- Address federal or other major research sponsors' priorities in emerging scientific or technology fields in the area of cancer prevention or cures for cancer;
- Are matched with funds available by a private or non-profit entity and institution or institutions of higher education;
- Are collaborative between any combination of private and non-profit entities, public or private agencies or institutions in this state, and public or private institutions outside this state;
- Have a demonstrable economic development benefit to Texas;
- Enhance research superiority at institutions of higher education in Texas by creating new research superiority, attracting existing research superiority from institutions not located in Texas, or enhancing existing research superiority by attracting from outside Texas additional researchers and resources; and
- Expedite innovation and product development, attract, create or expand private sector entities that
 will drive a substantial increase in high-quality jobs, and increase higher education applied science
 or technology research capabilities.



In fiscal year 2013, the Institute's budget included \$297,062,446 to support these initiatives, allocated as follows:

- Evidence-based Prevention Awards: \$29,006,567
- Cancer Patient Services: \$12,000 (license plate revenue)
- Academic and Product Development Research Awards: \$251,402,785
- Administrative Operations: \$4,000,053
- Grant Review and Award Operations: \$12,641,041

APPENDIX: CONFLICT OF INTEREST DOCUMENTATION

SECTION I - CONFLICT OF INTEREST LISTING

For each peer review panel during fiscal year 2013, a list of peer reviewers with a conflict of interest is provided. This document includes the CPRIT program type, name of panel, grant application number, principal investigator, institution, title of grant application and the name of the peer reviewer with a conflict of interest.

SECTION II – PEER REVIEW CERTIFICATION OF NON-PARTICIPANT IN EVALUATION OF INDIVIDUAL APPLICATIONS BECAUSE OF REAL OR APPARENT CONFLICT OF INTEREST

The third party grant review administrator's representative certifies that the reviewer identified as having a conflict of interest has signed this form and left the panel room or the teleconference call during the discussion of the application. This document includes the CPRIT program and name of panel, meeting type (on-site or teleconference), date, application number, principal investigator, institution, reviewer name and signature, and the grant review administrator's names.

NOTE: Individual post review statement signed by each committee member total 216 pages. Due to the large volume, these are not included in this appendix, however, they are available for public viewing on the Compliance page of the CPRIT website at www.cprit.state.tx.us.

APPENDIX: CONFLICT OF INTEREST DOCUMENTATION



2013 Cancer Prevention and Research Institute of Texas Commercialization Program

Order of Review

Panel: Panel A-FY13-Cycle 1

Oct 29 2012 - Oct 30 2012

Order	ler Log No.	PI/Institution/Title	Conflict
3	CP130041	Menander, Kerstin	R. Cosan
	***************************************	p53 Inc	
	COMP	ADMDA7 TUMOR SUPPRESSOR/IMMUNOMODULATORY CANCER TREATMENT	
∞	CP130045	Matthews, William	S. Gailar
***************************************		Leuchemix Inc	D. Scheinberg
	RELO	Treatment of leukemia and lung cancer with the novel agent LC-1	
9	CP130020	Rieder, Robert	R. McCloskey
		ESSA Pharma Inc.	
	RELO	ESSA Pharma Inc. Androgen Receptor N-Terminus Blocker Program for Prostate Cancer: Relocation Grant Application	
2	CP130050	Stone, James	R. McCloskey
		ProPep Surgical	
	COMP	Propep Surgical - Real-time Nerve Identification for Robotic Surgery	
=	CP130040	Klemm, Steven	R. Cosan
		Leonardo BioSystems, Inc.	
	COMP	First in Human treatment of Breast Cancer utilizing MultiStage nanoparticle delivery systems with novel doxorubicin conjugate polymer	
4	CP130014	Heidel, Jeremy	H. Lyerly
		PeptiMed	
	RELO	Clinical research and development of a targeted nanoparticle drug delivery system for siRNA anti- cancer drugs.	

January 16, 2014 2:06 pm

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2013 Cancer Prevention and Research Institute of Texas Commercialization Program

Order of Review

Panel: Panel A-FY13-Cycle 1

21

Oct 29 2012 - Oct 30 2012 Conflict D. Scheinberg PI / Institution / Title Clinical evaluation of targeted therapies for cancer indications with significant unmet needs. Phusis Therapeutics, Inc. Kirkpatrick, Lynn Order Log No. CP130037 FORM

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2013 Cancer Prevention and Research Institute of Texas Commercialization Program

Order of Review

Panel: Panel B-FY13-Cycle 2

Dec 17 2012 - Dec 17 2012	Conflict	M. Arkin			N. Clendeninn			
Dec 1'								
	/ Title							
	PI / Institution / Title			ent Stress in Cancer				
				Exploit Hypoxia and Nutri			lass Bcl-2 Cancer Drug	
		Ü	Peloton Therapeutics, Inc.	Creating a Drug Discovery Company to Exploit Hypoxia and Nutrient Stress in Cancer	ı, Richard	ProNAi Therapeutics, Inc.	Phase II Clinical Studies for a First in Class Bcl-2 Cancer Drug	
		Josey, John	Peloton Tl	Creating a	Messmann, Richard	ProNAi TI	Phase II C	
	Order Log No.	CP130057		СОМР	CP130066		RELO	
	Order	7			3			

2013 Cancer Prevention and Research Institute of Texas Prevention Programs

Order of Review

Panel: Prevention Green-A

Nov 14 2012 - Nov 15 2012

		7707 CT 1011 - 7707 ET 1011	TIOT CT AONT
Ord	Order Log No.	PI/Institution/Title	Conflict
8	PP130061	Vidrine, Damon R. Va	R. Vanderpool
		The University of Texas M. D. Anderson Cancer Cent	
	EBP	An evidence-based smoking cessation program for underserved persons living with HIV/AIDS	

2013 Cancer Prevention and Research Institute of Texas Prevention Programs

Order of Review

Panel: Prevention Lee-A

ar, Navkiran S Tech University Health Sciences (El Paso and Hudspeth County Breas ar, Navkiran S Tech University Health Sciences (asa En Casa: Preventing Cervical C asa En Casa: Preventing Cervical C Irez, Amelie Jniversity of Texas Health Science I Health Ministry for Cancer Preven B, Olga W Wellness Center Jti-Disciplinary Survirorship Collate	Log No. PI / Institution / Title PP130068 Shokar, Navkiran Texas Tech University Health Sciences Center The El Paso and Hudspeth County Breast Cancer Education, Screening and Navigation (BEST)Program PP130083 Shokar, Navkiran Texas Tech University Health Sciences Center EBP De Casa En Casa. Preventing Cervical Cancer in El Paso County and Hudspeth County PP130055 Ramirez, Amelie The University of Texas Health Science Center at S EBP Rural Health Ministry for Cancer Prevention PP130051 Young, Olga SLEW Wellness Center A Multi-Disciplinary Survirorship Collaboration for Underserved Women with Cancer
Shok Texa The J Shok The J Country Rami The U Shurai A Mu	0688 083 055

Order of Review

Sep 27 2012 - Sep 28 2012

Panel: Basic Cancer Review Committee-2A

A. Tomkinson E. Pure E. Pure E. Pure E. Pure E. Pure PI / Institution / Title Effects of BRCA1 Mutations on Induced Pluripotent Stem Cell Differentiation and Genome Integrity UT Southwestern Comprehensive Cancer Biology Computational Core Facility Structural analyses of the novel anti-cancer therapeutic target tankyrase Tumor cell lytic peptoids that target exposed phosphatidylserine Impact of PTEN loss on therapeutic responses in glioblastoma The University of Texas M. D. Anderson Cancer Cent The University of Texas Southwestern Medical Cente Protein Array and Analysis Core (PAAC) Udugamasooriya, Damith Burma, Sandeep Ross, Theodora Bedford, Mark Zhang, Xuewu Kraus, W. RP100644R1 Log No. RP130432 RP130258 RP130525 HIHRRA RP130231 RP130531 CFSA CFSA IIRA IIRA IIRA 20 56 33

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Page 6 of 10

Order of Review

Sep 27 2012 - Sep 28 2012

Panel: Basic Cancer Review Committee-2A

ō	Order Log No.	PI/Institution/Title	Conflict
42	2 RP130308	Liang, Han	P. Laird
		The University of Texas M. D. Anderson Cancer Cent	
	IIRA	Systematic Functional Characterization of RNA Editing in Endometrial Cancer	
43	3 RP130346	Martinez, Elisabeth	E. Pure
		The University of Texas Southwestern Medical Cente	
	IIRA	Discovery and targeting of novel tumor suppressor genes and oncogenes epigenetically regulated in lung cancer	
45	5 RP130126	Kaipparettu, Benny	G. Wahl
		Baylor College of Medicine	
	IIRA	Mitochondria nuclear cross talk in breast cancer stemness and metastasis	

Order of Review

Panel: Interfaces Review Committee-A

Sep 24 2012 - Sep 25 2012

201 74 7017 - 20h 72 7017	Conflict	C. Anderson			
7 +7 M20					
	PI/Institution/Title	Srivastava, Sanjay	Texas Tech University Health Sciences Center	Panhandle In Vivo and Molecular Imaging Core	
	Order Log No.	RP130578		CFSA	
	Order	3			

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Order of Review

Panel: Translational and Clinical Review Committee-1A/2A

Log No. Wang, Weny! The University of Texas M. D. Anderson Cancer Cent	Sep 10 2012 - Sep 11 2012	Conflict	M. Carducci			M. Carducci			M. Carducci			W. Barlow			A. McTiernan	M. Carducci	
der Log No. Wa RP130090 Wa IIRA Per IIRA Get RP130536 Bis IIRA Get RP130660 Rou RP130157 Go IIRA The IIRA Tar IIRA The IIRA Phy IIRA Phy		PI / Institution / Title		: University of Texas M. D. Anderson Cancer Cent	sonalized risk assessment for families with Li-Fraumeni Syndrome		iversity of North Texas Health Science Center at	netic Risk Prediction for Breast Cancer in Primary Care		as A&M University	ating Novel Translation Inhibitors to Target Pro-survival Oncoproteins		University of Texas M. D. Anderson Cancer Cent	geting cell cycle in primary resistant HR-positive/HER2-negative breast cancer			sical Performance Speed: a useful intervention, prognostic biomarker, and the sixth vital sign?
	i amsiamona	Log No.								L	<u> </u>					L	
14	41171.	Order	14 RP		IIIR	15 RP		III			Ħ			IIR			IIR

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Order of Review

Sep 19 2012 - Sep 20 2012

Panel: Translational and Clinical Review Committee-3A

ő	Order Log No.	PI / Institution / Title	Conflict
15	15 RP130256	Gee, Adrian	R. Vonderheide
		Baylor College of Medicine	
	CFSA	Texas Assistance for Cancer Cell Therapy (TACCT)	
18	18 RP130300	Schiff, Rachel	M. Brown
***************************************		Baylor College of Medicine	
	IIRA	AP-1 pathway as a master regulator of endocrine resistance in ER+ breast cancer: mechanisms, predictive value, and chemical genomic/	

APPENDIX: CONFLICT OF INTEREST DOCUMENTATION

SECTION II – PEER REVIEW CERTIFICATION OF NON-PARTICIPANT IN EVALUATION OF INDIVIDUAL APPLICATIONS BECAUSE OF REAL OR APPARENT CONFLICT OF INTEREST

RESEARCH

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APPENDIX

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest

2013 Cancer Prevention and Research Institute of Texas Research Programs

Panel: Translational and Clinical Review Committee-1A/2A

Meeting Type: Onsite Review

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Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
afiofis	RP130090	Wang, Wenyi	The University of Texas M. D. Anderson Cancer Center	Carducci, Michael	202	J. Balsam 198
4/10/13 -	RP1301 <i>57</i>	Gonzalez-Angulo, Ana Maria	The University of Texas M. D. Anderson Cancer Center	Barlow, William	Mot DISCUSSED	J. Balsom (AB
4/10/15- 4/11/19	RP130159	Simmonds, Maureen	The University of Texas Health Science Center at San Antonio	Carducci, Michael	Not Discussed	s.Balsom/813
4/10/12- 9/11/12	RP130159	Simmonds, Maureen	The University of Texas Health Science Center at San Antonio	McTiernan, Anne	Not discussed	J. Balsam/g&
Stolis-	RP130536	Biswas, Swati	University of North Texas Health Science Center at Fort Worth	Carducci, Michael	200	J.Balsam/gB

SRA Approval:

RAJAN MUNSHI Sept 11, 2012 Name (PRINT): Signature:

Date:

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Panel: Translational and Clinical Review Committee-1A/2A

Meeting Type: Onsite Review

	SRA Name/Initials*	J. Balsom / 48
	Reviewer Signature	Carducci not present at meeting
tions:	Reviewer Name	Carducci, Michael
he review of the following applications:	Applicant/PD/PI Organization	Texas A&M University
This is to certify that I was not present and did not participate in the review	Applicant/PD/P1 Name	Romo, Daniel
ify that I was not prese	Application Number	RP130660
This is to certi	Date	4 = 13

SRA Approval:

Comments:

Name (PRINT):	RAJAN MUNSHI	
Signature:	Jajoin Memsthi	
Date:	Sept 11, 2012	

* An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

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Panel: Basic Cancer Review Committee-3A

Meeting Type: Onsite Review

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Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
SRA Approval:				Comments:		
Name (PRINT):		Kimberly Bush	ush.			
Signature:		& mmely	Just Just			
Date:		2/18/2012)			

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^{*} An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Panel: Translational and Clinical Review Committee-3A

Meeting Type: Onsite Review

This is to certi	ly that I was not prese	This is to certify that I was not present and did not participate in the review o	the review of the following applications:	ons:		
Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
2102/61/6	RP130256	Gee, Adrian	Baylor College of Medicine	Vonderheide, Robert	Verified Telephonically Kimberly Bush by SRA	Kimberly Bush Example
9/19/2012	RP130300	Schiff, Rachel	Baylor College of Medicine	Brown, Myles		Kimberly Bush Kumper

SRA Approval:

Name (PRINT):	Kimberly Bush
Signature:	Khulm M
Date:	9/20/2012

Comments:

* An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

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Panel: Interfaces Review Committee-A

Meeting Type: Onsite Review

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Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
gloulie	RP130578	9/24/12 RP13057B SRIVASIAVA, S HENTA SLI CHY	fexas tech Univ. Herlth sei ctr	C. ANDERSON	Carolystelle	R.MUNSHI
					3	
SRA Approval:				Comments:		
Name (PRINT):		RAJAN MUNSH	NSHI			
Signature:		Jezia Heus L	,, rns			
Date:		rior'sr jus	210			

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^{*} An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Panel: Basic Cancer Review Committee-1A
Meeting Type: Onsite Review

This is to certi Date	fy that I was not pres	sent and did not participate in Applicant/PD/PI Name	This is to certify that I was not present and did not participate in the review of the following applications: Date Application Applicant/PD/PI Name Applicant/PD/PI	ions: Reviewer Name	Reviewer	SRA Name/Initials*	
	Number		Organization		Signature		
LS/12	G/25/12 130172	Janés gragorolas	University of Texas southwestern Medical Tyler Jacks	Tyler Jacks	Z	Jayre Paschall	
SRA Approval:	•			Comments:			
Name (PRINT):):	Tayne Paschal	7				
Signature:		Dave Mas	, bod				
Dafe:		0,4/25/2	7017				

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^{*} An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Panel: Basic Cancer Review Committee-2A

Meeting Type: Onsite Review

This is to certi	fy that I was not preser	This is to certify that I was not present and did not participate in the review	the review of the following applications:	ions:		
Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
	RP100644R1	Burma, Sandeep	The University of Texas Southwestern Medical Center at Dallas	Pure, Ellen	Ilellen	KB 9/27/2012
	RP130126	Kaipparettu, Benny	Baylor College of Medicine	Wahl, Geoffrey	Not Discussed KB 9/27/2017	e10e/Le/b 8x
	RP130231	Ross, Theodora	The University of Texas Southwestern Medical Center at Dallas	Pure, Ellen	Not Discussed K8 9/27/2012	489/21/8B
	RP130258	Udugamasooriya, Damith	The University of Texas Southwestern Medical Center at Dallas	Pure, Ellen	lectur	KB 9/27/2012
	RP130308	Liang, Han	The University of Texas M. D. Anderson Cancer Center	Laird, Peter	Not Discussed K89127/2012	E10e/16/1687

SRA Approval:

Kimberly Bush Name (PRINT): Signature: Date:

Comments:

* An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

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Panel: Basic Cancer Review Committee-2A

Meeting Type: Onsite Review

This is to certi	fy that I was not prese	This is to certify that I was not present and did not participate in the review	the review of the following applications:	ons:		
Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
	RP130346	Martinez, Elisabeth	The University of Texas Southwestern Medical Center at Dallas	Pure, Ellen	Not Discussed	eroe/re/b 91
	RP130432	Bedford, Mark	The University of Texas M. D. Anderson Cancer Center	Tomkinson, Alan	A Tamb	KB 9/27/2012
	RP130525	Zhang, Xuewu	The University of Texas Southwestern Medical Center at Dallas	Pure, Ellen	Menther	48 9/27/2012
	RP130531	Kraus, W.	The University of Texas Southwestern Medical Center at Dallas	Pure, Ellen	Not Discussed KB 9/27/2012	K8 9/2012

SRA Approval:
Name (PRINT):
Kimber

Kimberly Bush

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Signature:

Date:

Comments:

* An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

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APPENDIX: CONFLICT OF INTEREST DOCUMENTATION

SECTION II – PEER REVIEW CERTIFICATION OF NON-PARTICIPANT IN EVALUATION OF INDIVIDUAL APPLICATIONS BECAUSE OF REAL OR APPARENT CONFLICT OF INTEREST

PREVENTION

AAGCCCTGTT GTCTCTTACC CGTATGTTCA ACCA CACTTGTCTC TCGCTACTGC CGTG ACAA ACAC ATATACTATAH CHTACACAATA CATAATC T GAC

Panel: Prevention Lee-A

Meeting Type: Onsite Review

This is to certil	fy that I was not preser	This is to certify that I was not present and did not participate in the review	he review of the following applications:	ons:		
Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials* ·
	PP130051	Young, Olga	SLEW Wellness Center	McTiernan, Anne	Application not discussabl	Cheisea Reese Ch
	PP130055	Ramirez, Amelie	The University of Texas Health Science Center at San Antonio	Green, Lawrence	Did not attend/ Chelsea-Reest Application not discussed	Chelsea Reest
	PP130055	Ramirez, Amelie	The University of Texas Health Science Center at San Antonio	Wyatt, Stephen	Application not Chelsean Reese discussed	Chelsea Rees
11-13-12	PP130068	Shokar, Navkiran	Texas Tech University Health Sciences Center	Wilson, Katherine	Katherine Mylysm	Chelsea Pase
11-13-12	PP130083	Shokar, Navkiran	Texas Tech University Health Sciences Center	Wilson, Katherine	Katherin MM/Sm	Chelsen Keare

SRA Approval:

Name (PRINT): Chelsea Reese Signature: Chelsea Reese Signature: (helsea Reese 11.18.13

Comments:

Katherine Wilson's coi's were the first two opplications of the day. She carne to breakfast, signed out + went back to her yoom to until applications were complete.

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^{*} An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Panel: Prevention Green-A

Meeting Type: Onsite Review

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Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
51	PP130061	Vidrine, Damon	The University of Texas M. D. Anderson Cancer Center	Vanderpool, Robin	Abor Valling	Chelsea Reese OR

SRA Approval:

Name (PRINT):	Chelsea Reese
Signature:	Mulsea Reese
Date:	11.15.12

Comments:

e will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application
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Meeting Type: Teleconference Review

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Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
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Signature:		Jame 7.	Traint	(upp://da	JONS Y CONFLICTOR	
Date:		12-17-12				

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^{*} An SRA Representative will add their name and initials to the form to acknowledge that the teviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

APPENDIX: CONFLICT OF INTEREST DOCUMENTATION

SECTION II – PEER REVIEW CERTIFICATION OF NON-PARTICIPANT IN EVALUATION OF INDIVIDUAL APPLICATIONS BECAUSE OF REAL OR APPARENT CONFLICT OF INTEREST

PRODUCT DEVELOPMENT

AAGCCCTGTT GTCTCTTACC CGTATGTTCA ACCA CACTTGTCTC TCGCTACTGC CGTG ACAA ACAC ATATACTATAH CHTACACAATA CATAATC T GAC

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest

2013 Cancer Prevention and Research Institute of Texas Commercialization Program FY 2013 Cycle 1

Meeting Type: Teleconference Review

Panel Name: Panel A -FY13- Cycle 1 (COM-A-13-1)

Session Date: 9/27/2012

Notes from SRA					Verified telephonically by SRA				Verified telephonically by SRA						Verified telephonically by SRA	Verified telephonically by SRA					Verified telephonically by SRA
Reviewers with COI	(none)	(none)	(none)	(none)	Kim Lyerly	(none)	(none)	(none)	Mac McCloskey	(none)	(none)	(none)	(none)	(none)	David Scheinberg	Roy Cosan	(none)	(none)	(none)	(none)	David Scheinberg
Applicant's Organization	Nancogenics Inc.	DNAITX, LLC	Base Pair Biotechnologies, Inc.	DNAtrix, Inc.	PeptiMed	Radiomedix, Inc.	Genprex, Inc	Karo Bio AB	ESSA Pharma Inc.	Cell>Point, L.L.C.	CerRx, Inc.	Lone Star Thiotherapies	MetronomX, Inc.	NIRFImaging, Inc	Phusis Therapeutics, Inc.	Leonardo BioSystems, Inc.	p53 Inc	IDEV Technologies, Inc.	Trojantec Ltd	SiteSelect Medical Technologies,Inc	Leuchemix Inc
Applicant's Name	Seeney	Messmann	Jackson	Tufaro	Heidel	Delpassand	Tomasso	Öhlander	Rieder	Bryant	Love	Kennedy	Chen	Flolid	Kirkpatrick	Klemm	Menander	Dame	Nowotnik	Pourgol	Matthews
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App. ID	CP130010	CP130011	CP130012	CP130013	CP130014	CP130015	CP130018	CP130019	CP130020	CP130021	CP130023	CP130026	CP130032	CP130036	CP130037	CP130040	CP130041	CP130042	CP130043	CP130044	CP130045

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Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest

2013 Cancer Prevention and Research Institute of Texas Commercialization Program FY 2013 Cycle 1

Meeting Type: Teleconference Review

Notes for SFA				Verified telephonically by SRA	
Reviewess with cols	(none)	(none)	(none)	Mac McCloskey	(none)
Application Organization	LaserGen, Inc.	Rescue Therapeutics, Inc.	Daedalus Software, Inc.	ProPep Surgical	M. D. Anderson Cancer Center
Appliants Name	Healy	Sacchettini	Sharif	Stone	Sood
Med.	COMP	FORM	FORM	COMP	FORM
A S	CP130046	CP130048	CP130049	CP130050	CP130051

CPRIT Staff Attending	Cobbs, Jerry	Doyle, Kristen	Ulrich, Robert (Chair)		SRA Staff Attending	Myers, Claire		Third-Party Observer Attending	Sarjoo, Priya (from Grant Thornton)		COMP: Company Commercialization Awards	FORM: Company Formation Awards	RELO: Company Relocation Awards		115A STATE COSESSIVE	Don't
Reviewers Attending	Adjei, Alex	Cipau, Gabriel	Clendeninn, Neil	Cosan, Roy	Gailar, Steve	Geltosky, Jack	Jordan, Jim	Lawrence, Moira	Lyerly, Kîm	McCloskey, Mac	Pegram, Mark	Scheinberg, David	Serrero, Ginette	Shoemaker, David	Vasconcelles, Mike	Yamashita. Liz

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Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest

2013 Cancer Prevention and Research Institute of Texas Commercialization Program FY 2013 Cycle 1

Meeting Type: Teleconference Review

SRA Approval:

Claire Myers	Cleure Myess	9/27/2012
Name (PRINT):	Signature:	Date:

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Panel: Panel A-FY13-Cycle 1

Meeting Type: Onsite Review

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याव्हिवा	CP180045	10/30/12 CP130045 Mathems	Leuchema, In Steve Galar	Steve Galar	S. Dail	3
SRA Approval:	•			Comments:		
Name (PRINT):		Claure Myers	ورج			
Signature:		Cleux Myers	P.			
Date:		10/30/12				

^{*} An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

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Panel: Panel A-FY13-Cycle 1

Mceting Type: Onsite Review

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	nas not p	was not present and did not participate in the review	n the review of the following applications.	ations		
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Name (PRINT): Kimber W Bush
Signature: Kumkulu A Date: 10/30/30/3

Comments:

* An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

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Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest 2013 Cancer Prevention and Research Institute of Texas Commercialization Program

Panel: Panel A-FY13-Cycle 1

Meeting Type: Onsite Review

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Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	SRA Name/Initials*
	CP130050	Stone, James	ProPep Surgical	McCloskey, Richard	Richards. Watch gree	2

SRA Approval:

Name (PRINT): Kimberly Bush
Signature: Kimberly Bush
Date: 18 30 30 3

Comments:

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^{*} An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Meeting Type: Onsite Review Tele Contended Theview Panel: Panel B-FY13-Cycle 2

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Dafe	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer	SRA Name/Initials*
12/3/12	CP130057	Josey, John	Peloton Therapeutics, Inc.	Arkin, Michelle	verthed telephonisaces	ומכנה כמי
12/3/12	CP130066	Woolliscroft, Michael	ProNAi Therapeutics, Inc.	Clendeninn, Neil	verified telephaneals	wall Car

SRA Approval:

Name (PRINT):	Claire Myers
Signature:	Cleur Myrs.
Date:	12/3/2012

Comments:

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gnature:	Cleve Myras	
ate:	12/3/2012	

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^{*} An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Panel: Panel B-FY13-Cycle 2

Meeting Type: Onsite Review

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2/11/15	CP130057	Josey, John	Peloton Therapeutics, Inc.	Arkin, Michelle	Midelagh	OM
12/12/12	CP130066	Woolliscroft, Michael	ProNAi Therapeutics, Inc.	Clendeninn, Neil	Med Clude con	CM

Clour Myser Claire Myers 12/17/12 Name (PRINT): SRA Approval: Signature: Date:

Comments:

* An SRA Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

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